



[www.dshs.state.tx.us/elp](http://www.dshs.state.tx.us/elp)  
In Texas Only: (800) 572-5548  
Local (512) 834-6600  
Fax: 512-834-6614

**FOR DSHS USE ONLY**  
**BUDGET/FUND: ZZ112-085**

Remit #: \_\_\_\_\_

Remit Date: \_\_\_\_\_

## Lead Firm Certification Application Initial/Renewal

### DO NOT WRITE IN THIS BOX – FOR DEPARTMENT USE ONLY

Rcvd Date: \_\_\_\_\_ Init. \_\_\_\_\_

Post Mark Date: \_\_\_\_\_

Rvw Date: \_\_\_\_\_ Init. \_\_\_\_\_

Aprv Date: \_\_\_\_\_ Init. \_\_\_\_\_

Amt Rcvd:\$\_\_\_\_\_ FY:\_\_\_\_\_

Expiration Date: \_\_\_\_\_ Init. \_\_\_\_\_

Print Date: \_\_\_\_\_ Init. \_\_\_\_\_

Mail Date: \_\_\_\_\_ Init. \_\_\_\_\_

#### **COMPLETE THE FOLLOWING:**

**If renewing, enter the firm's current certification number:** \_\_\_\_\_ **Expiration Date:** \_\_\_\_\_

☐ Sole Owner/Proprietorship

☐ LLP (Limited Liability Partnership)

☐ LLC (Limited Liability Company)

☐ LP (Limited Partnership)

☐ Partnership

☐ Corporation

☐ DBA (Doing Business As)

#### **TYPE OF LEAD FIRM:**

☐ Abatement

☐ Non Abatement

☐ Non Abatement & Abatement

Legal Business Name

State Tax Payer's Identification number

DBA Name (if applicable)

( )  
Telephone Number (include area code)

Firm's Owner or Authorized Agent (Last Name, First Name, MI)

Title of Owner or Agent

( )  
Telephone Number (include area code)

Business Mailing Address (include suite #)

City

State

Zip Code

Business Physical Address (include suite #)

Company e-mail address

**CERTIFICATION:** I certify that I am authorized by the company to make this application and to sign on its behalf. I have read and understand the applicable rules and agree on behalf of the applicant to comply with them. I understand that it is a violation of DSHS rules and the Texas Penal Code §37.10 to submit any false or fraudulent information or documents in order to obtain a license. All information I have provided on this application is true, correct, and complete to the best of my knowledge.

Signature of Authorized Person

Date

#### **Mailing address for applications containing money:**

Department of State Health Services - MC 2003  
Environmental & Sanitation Licensing Group  
PO Box 149347  
Austin, Texas 78714-9347

#### **Mailing address for all other mail:**

Department of State Health Services – MC2835  
Environmental & Sanitation Licensing Group  
PO Box 149347  
Austin, Texas 78714-9347

## IMPORTANT INFORMATION

- To avoid late fees a complete application & all required documentation must be postmarked prior to expiration of license.
- You may pay for your license online at [www.dshs.state.tx.us/elp](http://www.dshs.state.tx.us/elp) and mail license requirements & copy of online payment to address provided on page one. License requirements must be postmarked prior to expiration of license.

**The following fees and documentation is required for certification in accordance with §295.211 of the Texas Environmental Lead Reduction Rules:**

### **Certification Fees:** *(two-year term)*

- ☐ INITIAL/RENEWAL: Total Cost: \$1030.00
- ☐ EXPIRED FOR 90 DAYS OR LESS: Total Cost: \$1530.00
- ☐ EXPIRED FOR MORE THAN 90 DAYS BUT LESS THAN ONE YEAR: Total Cost: \$2030.00

### **Requirements for an Initial Certification:**

- ☐ 1. The required certification fee (See fees above.)
- ☐ 2. A statement on a letter signed by the firm's owner or authorized agent of the firm certifying that the firm will only employ certified employees to conduct lead-based paint activities §295.211(b)(1)(A)
- ☐ 3. A statement on a letter signed by the firm's owner or authorized agent of the firm that the firm will follow the standards for conducting lead-based paint activities set out in §295.212 of this title (relating to Standards for Conducting Lead-Based Paint Activities) §295.211(b)(1)(B)
- ☐ 4. A statement signed by the firm's owner or authorized agent of the firm indicating whether the firm is a corporation (give the state of incorporation and charter number), OR if not a corporation, list all owners and their titles employed by the unincorporated firm §295.211(b)(3)
- ☐ 5. If the firm operates under an assumed name, the owner or authorized agent of the firm shall provide to the department with their Lead Firm application a copy of the firm's Certificate of Assumed Name that lists the firm's Assumed Name of Business, the address of the firm, and the name of the person registering the firm as an assumed name §295.211(b)(4)

### **Requirements for Renewing a Certification:**

- ☐ 1. The required certification fee (See fees above.)
- ☐ 2. A statement on a letter signed by the firm's owner or authorized agent of the firm certifying that the firm will only employ certified employees to conduct lead-based paint activities §295.211(b)(1)(A)
- ☐ 3. A statement on a letter signed by the firm's owner or authorized agent of the firm that the firm will follow the standards for conducting lead-based paint activities set out in §295.212 of this title (relating to Standards for Conducting Lead-Based Paint Activities) §295.211(b)(1)(B)
- ☐ 4. A statement signed by the firm's owner or authorized agent of the firm indicating whether the firm is a corporation (give the state of incorporation and charter number), OR if not a corporation, list all owners and their titles employed by the unincorporated firm §295.211(b)(3)
- ☐ 5. If the firm operates under an assumed name, the owner or authorized agent of the firm shall provide to the department with their Lead Firm application a copy of the firm's Certificate of Assumed Name that lists the firm's Assumed Name of Business, the address of the firm, and the name of the person registering the firm as an assumed name §295.211(b)(4)

### **PRIVACY NOTIFICATION/NOTIFICACIÓN SOBRE PRIVACIDAD**

With few exceptions, you have the right to request and be informed about information that the State of Texas collects about you. You are entitled to receive and review the information upon request. You also have the right to ask the state agency to correct any information that is determined to be incorrect. See <http://www.dshs.state.tx.us> for more information on Privacy Notification. (Reference: Governor Code, Section 552.021, 552.023, 559.003 and 559.004)

Tan solo por unas cuantas excepciones, usted tiene el derecho de solicitar y de ser informado sobre la información que el Estado de Texas reúne sobre usted. A usted se le debe conceder el derecho de recibir y revisar la información al requerirla. Usted también tiene el derecho de pedir que la agencia estatal corrija cualquier información que se ha determinado sea incorrecta. Dirijase a <http://www.dshs.state.tx.us> para más información sobre la Notificación sobre privacidad. (Referencia: Government Code, sección 552.021, 552.023, 559.003 y 559.004.)